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	PTO/SB/81 (01-08			
Application Number	10/661,208			
Filing Date	September 12, 2003			
First Named Inventor	Mark Flowers			
Title	ELECTROGRAPHIC POSITION LOCATION APPARATUS AND METHOD			
Art Unit	2629			
Examiner Name	Steven E. Halton			
Attorney Docket Number	020824-011500US			

I hereby appoir	e all previous powers of attorney given	The state of the s	application.	*
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Assignee of reco Statement u	ord of the entire interest. See 37 CFR 3.71, nder 37 CFR 3.73(b) is enclosed. (Form PT	ГО/SB/96).	•	
	SIGNATURE OF API	plicant or Assignee of Re	ecord	
	1/2ut two	7	Date 10/	2/07
gnature			Telephone	(510) 420-5000
gnature	Robert Lattuga	•	· ·	
	Robert Lattuga Assistant General Counsel, LeapF	rog Enterprises, Inc.		
ame de and Company	Assistant General Counsel, LeapF		are required, Submi	



PTO/SB/96 (04-07)
Attorney Docket No. 020824-011500US

~	THAT STATE OF THE	STATEMENT U	NDER 37 CFR 3.73(b)
Applicant/Pa	etent Owner: Mark Flowers			4
	No./Patent No.: 10/661,208			09/12/2003
	Electrographic Position			
LeapFrog	Enterprises, Inc.	, a	Corporation Type of Assignee: corporation,	partnership, university, government agency, etc.)
states that it				
	e assignee of the entire right,			
2. an	assignee of less than the en he extent (by percentage) of	itire right, title and i	interest. est is%)	
in the patent	application/patent identified	above by virtue of	either:	
uie Oi	nment from the inventor(s) of nited States Patent and Trade nment is attached.	the patent applicat emark Office at Re	ion/patent identified abo el, Frame	ve. The assignment was recorded in e, or a true copy of the original
B. A chain of	f title from the inventor(s), of ti	he patent applicatio	n/patent identified above	, to the current assignee as follows:
1. Fr	om: <u>Flowers, Mark</u>		To :Knowledge Kids	Enterprises, Inc., D.B.A. LeapFroq
•	THE GOODING HE WAS LECTION	in the outled stat	es patent and Trademai	'K Ottice at
	Reel <u>011435</u> , Frame _	0718	, or for which a copy	thereof is attached.
2. Fr	om: Knowledge Kids Enterp	rises, Inc.	To :LeapFrog Entern	orises, Inc.
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he undersign	led (whose title is supplied b	elow) is authorized	to act on behalf of the a	ssignee. /0/2/6 7
	Signa	uture		Date
	Robert L	attuga		510-420-5000
	Printed or Ty	ped Name		Telephone Number
	Assistant Gen	eral Counsel		
	Titl	e		